UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

DAVID COLEMAN,

Plaintiff.

-against-

THE STATE OF NEW YORK POLICE DEPARTMENT; THE CITY OF NEW YORK,

Defendants.

20-CV-2146 (LLS) ORDER

LOUIS L. STANTON, United States District Judge:

By order dated March 19, 2020, the Court granted Plaintiff's application to proceed *in forma pauperis* (IFP) but held that the complaint failed to state a claim on which relief can be granted. The Court granted Plaintiff leave to file an amended complaint within sixty days of the date of that order.

On May 14, 2020, the Court received a letter from Plaintiff requesting an extension of time to file his amended complaint. (ECF 5). Plaintiff explains in the letter that he did not receive the Court's order to amend until March 30, 2020. He also states that he needs additional time because he has filed a request under the New York Freedom of Information Law, seeking his arrest records and the names of the officers involved in his arrest, but has not yet received this.

The Court grants Plaintiff's request for a 30-day extension of time to file an amended complaint. If Plaintiff chooses to file an amended complaint, he shall do so within 30 days of the date of this order.

The Court notes, however, that if Plaintiff is unable to obtain the names of the individuals involved, he can identify these individuals as "John Doe #1" or "Jane Doe #1" in the caption of the amended complaint and explain in the body of the amended complaint what each John or

Jane Doe defendant did or failed to do that violated his rights. Once Plaintiff files an amended complaint, if the allegations state a claim and supply sufficient information, it may be appropriate for the Court to direct the New York City Law Department, under *Valentin v. Dinkins*, 121 F.3d 72, 76 (2d Cir. 1997), to identify the true names of the John or Jane Doe defendants and provide this information to Plaintiff and the Court.

#### CONCLUSION

Plaintiff's request for a 30-day extension of time to file his amended complaint is granted. If Plaintiff chooses to file an amended complaint, he shall do so within 30 days of the date of this order. For Plaintiff's convenience, a copy of the amended complaint form is attached to this order.

This order shall be mailed in chambers.

SO ORDERED.

Dated: May 14, 2020

New York, New York

Louis L. Stanton
Louis L. Stanton
U.S.D.J.

<sup>&</sup>lt;sup>1</sup> The naming of John Doe defendants, however, does *not* toll the three-year statute of limitations period governing this action and Plaintiff shall be responsible for ascertaining the true identity of any "John Doe" defendants and amending his complaint to include the identity of any "John Doe" defendants before the statute of limitations period expires.

# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Write the full name of each plaintiff.	CV (Include case number if one has been assigned)
-against-	COMPLAINT (Prisoner)
	Do you want a jury trial? ☐ Yes ☐ No
Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.	

## **NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

State below the federal legal basis for your claim, if known. This form is designed primarily for

## I. LEGAL BASIS FOR CLAIM

often brought un		nst state, county, or	f confinement; those claims are municipal defendants) or in a
☐ Violation of	my federal constitutional	rights	
☐ Other:			
II. PLAINT	TIFF INFORMATION		
Each plaintiff mu	st provide the following inf	formation. Attach ad	dditional pages if necessary.
First Name	Middle Initial	Last Nam	ne
-	ames (or different forms of previously filing a lawsuit.		ave ever used, including any name
	ou have previously been in er (such as your DIN or NY		custody, please specify each agency ou were held)
Current Place of	Detention		
Institutional Add	ress		
County, City		State	Zip Code
III. PRISON	IER STATUS		
Indicate below w	hether you are a prisoner	or other confined pe	erson:
☐ Pretrial deta	inee		
-	nitted detainee		
☐ Immigration			
	nd sentenced prisoner		
☐ Other:			

### IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:							
	First Name Last Name		Shield #				
	Current Job Title (o	Current Job Title (or other identifying information)					
	Current Work Addr	ess					
	County, City	State	Zip Code				
Defendant 2:	First Name	Last Name	Shield #				
	Current Job Title (o	r other identifying information)					
	Current Work Addr	ess					
	County, City	State	Zip Code				
Defendant 3:							
	First Name	Last Name	Shield #				
	Current Job Title (or other identifying information)						
	Current Work Address						
	County, City	State	Zip Code				
Defendant 4:	First Name	Last Name	Shield #				
	Current Job Title (or other identifying information)						
	Current Work Address						
	County, City	State	Zip Code				

V. STATEMENT OF CLAIM
Place(s) of occurrence:
Date(s) of occurrence:
FACTS:
State here briefly the FACTS that support your case. Describe what happened, how you were narmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

# 

INJURIES:
If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
VI. RELIEF
State briefly what money damages or other relief you want the court to order.

#### VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated		Plaintiff's Signature		
First Name	Middle Initial	Last Name		
Prison Address				
County, City	State		Zip Code	
Date on which I am delivering this complaint to prison authorities for mailing:				